Rio Arriba Pathways Pilot Project – Espanola, New Mexico DRAFT – 06/01/09

Resources Target Population Activities Outcomes Pathways **Primary Populations** Funding Pathway Services Improved Service Outcomes Infrastructure Targeted Risk Factors · Funding in NM Targets at risk Development Lack of access to medical, does not come substance abuse Enrollment: Improvements into access to care mental health, and other from the pregnant women. Creation of Community Clinic and hospital refer pregnant women who are at high risk for substance use to Relationship with CHW continued for at least 6 services (first, because the counties Hub: CHW pathways program. Referrals from Clinics, Substance Abuse Treatment months post-natal pathway is addressing this No reliable, • CHW provides Centers, and Walk-ins. risk factor directly) stable funding community hub for Mother has previous source. pathways services Care Coordination: personal or family history Improved Patient Outcomes: ~\$60K in pooled In-referral systems • An assessment is of the client is conducted by the CHW and an agreed upon of substance abuse Baby has a viable birth weight funds developed with clinics, action plan is developed that will reduce barriers to care and facilitate One or both parents have Baby is born free of illicit substances legal problems or have hospital, first born necessary prenatal treatment. Staffing: Mother completes evidenced based parenting been in jail program, TWU, and CWH completes assessment: Needs, resources, and strengths related to prenatal care, 1 Case Manager 4) Poverty community outreach substance abuse treatments, and basic needs. Director of Case Less alcohol and tobacco exposure during pregnancy. community norms that Out-referral systems Pregnancy Education and Care coordination: CHW provides pregnancy education to Management and Baby breastfed for at least 60 days support substance use developed, including Lauren share the Child has a medical home 6) Lack of parenting skills human services, clinics, reporting duties Identify barriers to accessing needed services: prenatal care, substance abuse treatment facilities, 1 CHW (Kathy) treatment and support, meeting basic needs Patient Population support groups, etc. Develop plan for addressing barriers - Make indicated referrals to services: prenatal Rio Arriba County covers Information care, substance abuse treatment and support, basic needs nearly 6000 square miles of coordination systems mountainous terrain. developed to facilitate effective pathways Evidence Based Intervention Confirmed: implementation and · Parenting - Classes for persons who have court orders for participation, evaluation financial incentives, opportunities for children to attend class, psychosocial support. Parenting may occur during and after pregnancy. Community Identification and Training Plan implemented for 5 mothers - do an assessment and get them into Partners of Community Health Workers (CHWs): Follow up: Were service initiated? Were services continued (if appropriate)? Safety net · CHW has a background "Compliance" with service plan providers that represents the Hospitals, community. Final Outcome: Clinics, · Address transportation and housing Substance Abuse Financial Incentives and Connect with pregnancy centers Treatment Retention of CHW's: Food stamps, nutrition, WIC Providers Local and State The number of visits for prenatal care depends on the recommended AMA guidelines (the visits are dependent on when the infant comes in) government Service Monitoring: officials policy No set education followed · Classes for persons who makers No survey administered for patients. have court orders for Private Compliance with service plan participation practitioners No alcohol exposure during pregnancy Opportunities for Community No tobaccos exposure during pregnancy children to attend class Leaders Baby born at optimal birth weight Psychosocial support Faith Based Baby born without non-prescribed substances in blood Developing a database Organizations FOHC

Context

The Rio Arriba Pathways Program uses Promotores to improve such health outcomes as: Viable birth weights, mother participation and completion of program, Evidence-based Practices in Parenting, Substance Abuse Treatment Compliance. They have 13 mothers enrolled—5 babies delivered. Began in July 2008. All viable birth weights.